Form <b>13614NR</b> (Rev. 8-2007)		Nonreside	OMB# 1545-2075												
Last or Family Name:	First:				Middle Initial:										
ITIN or Social Security #: Visa #				P			assport #:								
Date of Birth: /	e-mail Address:														
Are you a U.S. citizer	n or resider	☐ No	Were	/ere you ever a U.S. citizen? ☐ Yes ☐ No											
U.S. Local Street Add	dress:			•											
City:	State: Zip Code:														
Foreign Residence A	ddress:			•											
Address Line 2:	Address Line 2:														
Postal Code:	Provinc	Province/Region: Foreign Count					ntry:								
Country of Citizenship	I	Country that issued Passport:													
Are you married? Yes No If YES, is your spouse in the U.S.? Yes No															
Are you a: Resident Of Canada Yes No Of Mexico Yes No Republic of Korea Yes No															
Do you have depende	nts?	Yes No	If YES, how r	many?	Are they in the United States?  Yes No			es 🗌 No							
Dependent Informati	on					1									
First Name	Last Name	Date of Birth (mm/dd/yyyy)	ITIN or SSN	Relationship to you	Months in U.S.	U.S. Citizen, National, Resident of Canada, Mexico, Republic of Korea	Did monoperson 5 file joint th	provide propre than 50% of eir own to	Did the person ovide have re than O% of Income of \$3400 pport?						
What is the data you	CIDST onto	rad tha Unite	nd States?	1	, ,										
What is the date you Entry Immigration St			ed States?	/											
U.S. Immigrant/Perma H-1 Temporary Emplo Other: (List)	e Visitor	F-2 Spouse or child of Exchange Visitor  J-2 Spouse or child of Exchange Visitor													
<b>Current Immigration</b>	Status - Ch	eck one:													
U.S. Immigrant/Perma H-1 Temporary Emplo Other: (List)	e Visitor	☐ F-2 Spouse or child of Exchange Visitor ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐													
On what date did your	visa type cł	nange?	/ /												
Enter the type of U.S. visa you held during these years:															
2001 20	02	2003	2004		2005	20	006								
If Immigration status is J-1, what is the subtype? Check one:  01 Student															
What is the actual primary activity of the visit? Check one:															
01 Studying in a Degree Program       04 Lecturing       07 Conducting Research       10 Clinical Activities         02 Studying in a Non-Degree Program       05 Observing       08 Training       11 Temporary Employment         03 Teaching       09 Demonstrating Special Skills       12 Here with Spouse															

2001 2002 2003			r student for any part of 2 of the 6 prior ca	ılendar years?	•								
Were you present in the U.S. as a teacher, trainee or student for any part of more than 5 calendar years?													
How many days were you present in the	U.S. during	2005 _	2006 2007										
List the dates you entered and left the United States during 2007:													
Did you file a U.S. income tax return for any year before 2007?   Yes  No If "Yes", when / / What form?													
During 2007, did you apply for or take affirmative steps to apply for lawful permanent resident status in the United States?  Yes No													
Do you have an application pending to change your status to lawful permanent resident?  Yes No													
Are you claiming treaty benefits?   Yes No If Yes, What country													
Treaty Article Number:													
Type & Amount of Income:  Information about academic institution years.	ou attended	d in 2007											
Name:		Т	Felephone Number:										
Address:													
Name of the director of your specialized pro-	gram:												
Address:													
Telephone Number:													
During 2007 did you receive:			Did you have:										
Scholarships or Fellowship Grants	☐ Yes	☐ No	Educator Expenses	☐ Yes	☐ No								
Wages, Salaries or Tips	☐ Yes	☐ No	Student Loan Interest	☐ Yes	☐ No								
Interest or Dividend Income	☐ Yes	☐ No	State Income Taxes	☐ Yes	☐ No								
Distributions from IRA, Pension or Annuity	☐ Yes	☐ No	Charitable Contributions	☐ Yes	☐ No								
Business Income	☐ Yes	☐ No	Moving Expenses	☐ Yes	☐ No								
Unemployment Compensation	☐ Yes	☐ No	Business Expenses	☐ Yes	☐ No								
Gambling Winnings	☐ Yes	☐ No	Child/Dependent Care Expenses	☐ Yes	☐ No								
Any Other Income	☐ Yes	☐ No	IRA Contributions	☐ Yes	☐ No								